

Employees Surpass United Fund Fair Share Goal



"WE'RE CHAMPS TOO" reads the banner held by four employees who helped Barnes exceed its "fair share" goal for the United Fund. The caption draws attention to the hospital's record-smashing victory, and compares it to another great moment of the month—the Cards' World Series victory. Left to right: Gene Spalding, dispatch co-ordinator; Mrs. Sharon Gaskill, 8100 head nurse; Miss Mildred Brocksmith, head nurse in Barnes Recovery Room, and Miss Nancy Craig, assistant director.

Barnes Hospital employees met and exceeded their "fair share" goal for the United Fund—a first for the hospital.

They not only made the \$28,000 goal set by the hospital, but by the middle of October, they had surpassed the \$33,000 "fair share" goal set by the United Fund itself. On Oct. 19, with returns still coming in, they had pledged more than \$36,000.

The \$36,000 represents more than 129% of the original \$28,000 goal.

"I can't tell you how pleased I am at this favorable response," said Miss

Nancy Craig, assistant director, who was chairman of the drive. She especially commended nursing service for its participation, but credited other departments as well.

The first departments to meet their division goals were personnel, purchasing, stores, forms control, print shop, methods, data processing and cashier's office, under John L. Warmbrodt, deputy director. On the same day, Oct. 3, Controller Robert McAuliffe's departments of budgeting, general accounting, internal audit, cost accounting, pa-

The Director Says 'Thank You'

For the first time in Barnes Hospital history, its employees have become "fair share" givers to the United Fund campaign. In years past, while we have succeeded in making established goals and in some cases even exceeded them, we have never before attained the levels of participation and giving as we have this year, which very definitely establishes Barnes Hospital employees as "fair share" givers to the annual Greater St. Louis United Fund Campaign.

It is gratifying to see Barnes people accept their responsibility to the community and tangibly express their feelings through very generous support of United Fund. Personally, I am thankful for the response for still another reason—the increasing ability of Barnes' 3,000 employees to work together and respond successfully to any reasonable goal presented to them. This ability is certainly an element in measuring good *esprit de corps* and morale.

Please accept my sincere appreciation to all who were part of this splendid showing and fine success. You are to be complimented and congratulated.

Robert E. Frank
Director

tients accounts and fund office surpassed their division goal too.

One of the first nursing service departments to make returns was the Barnes Recovery Room, whose employees made 140% of their department's goal. Nursing division 8100 contributed 220% of its goal. This year for the first time, every employee in the department of dispatch made a contribution.

Nursing service, the division with the most employees, had reached 98% of its goal by Oct. 19. Their payrolls rep-

resent a little less than 50 per cent of total wages paid to Barnes employees. Because there are more employees in this division, it has taken longer to solicit pledges. Based on returns already made by nursing, this division is expected to exceed its goal too.

This year 174 supervisors personally approached the more than 3,000 Barnes employees, as compared with the 75 persons who solicited funds last year. Last year Barnes employees gave \$26,435, exceeding the hospital's goal for 1966 of \$25,000 by \$1,435.

Computer to Speed Clinic Appointments Of Barnes Patients

The clinic patient at Barnes Hospital will achieve a new dignity when he no longer has to wait an unknown amount of hours to see his doctor. This will come about beginning Nov. 1 when Eye Clinic patients in McMillan Hospital arrive for appointments at a specified time, and are seen almost immediately by their doctors.

It is anticipated that the clinic patient will have to wait no longer than the average private patient waits to see his own doctor in a private office. Because of the enormous number of patients examined weekly in the clinics, an efficient method of making appointments at a specified time was impossible

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Children's Christmas Corner Seeks Donations of Toys

The "Children's Christmas Corner," a toy and doll sale project sponsored by the Barnes Hospital Auxiliary, is seeking donations of new and used toys and dolls to sell in the Nearly New Shop. Toys are being accepted now by the shop which is located in the basement of Barnes main building.

Auxiliary members, hospital employees and anyone else interested in the project are urged to make donations. Proceeds from the sale will be used to buy special needed equipment for the hospital.

The project is under the direction of Mrs. Frank Shobe of the Auxiliary and the volunteers in charge of the Nearly New Shop.

The shop is open on Mondays and Fridays from 8 a.m. to 4 p.m. "The earlier we receive the toy and doll dona-




PREVIEWING some of the toys donated to the Children's Christmas Corner sale are two recent visitors to the hospital, Gina Mensinger and Tommy Favier.

tions, the better," Mrs. Shobe added. "In this way we can have a complete display of toys when the sale begins."

If a donor is unable to deliver his toy to the hospital, he should phone FO 7-6400, Sta. 636, so that a volunteer can pick up his donation.

Six Doctors Are Appointed To Barnes Attending Staff

Six doctors recently joined the attending staff of Barnes Hospital. Three assistant pediatricians now on staff are Dr. Arthur L. Prenskey and Dr. Elliot F. Gellman, appointments effective on Sept. 1, and Dr. Samuel W. Boellner, effective July 24. Dr. John A. Collins has been appointed assistant surgeon effective Sept. 1. Appointed to W. U. Clinics were Dr. William J. Phillips and Dr. Edward M. Wolfe.



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Dr. Roger Unger to Give Olmsted-Barnes Lecture; Recipient of Lilly Award

Dr. Roger Unger, associate professor of medicine at the University of Texas Southwestern Medical School, will speak at the fourth annual William H. Olmsted-Barnes Hospital lecture at 8 p.m. Nov. 15 in Clifton Auditorium.

Dr. Unger will speak on "The Enteroinular Axis: The Physiologic Roles of the Betacytotropins and Alphacytotropins of the Gastrointestinal Tract." The lecture is open to doctors in the community, to house staff physicians and students.

Dr. Unger's research activities include studies involving insulin and glucagon. He is studying the physiology of these hormones and how they are involved in human disease.

He was recognized for his work in the field of diabetes in 1964 when he was presented the Lilly Award by the American Diabetes Assn.

The annual Olmsted-Barnes lectures were founded in honor of Dr. W. H. Olmsted who practiced medicine for more than 50 years in St. Louis. He was the first to direct a series of lectures at Barnes in 1923 on the use of insulin in the treatment of diabetes.

Dr. Olmsted was the founder and the first president of the Barnes Hospital Society and founder of the St. Louis Diabetes Assn.

Group Work With Patients 'in Same Boat' Found to Be Helpful Tool by Social Service

Most people think of a hospital as a place to go to correct some physical problem. This is a true definition, but not a complete one. Many times a patient is completely cured. He goes home and soon resumes his old way of life. But when some patients go home, their lives must change. They find they must live with a new diet, take new medicine, cut down on physical activities, adjust to a paralysis or to an artificial arm or leg.

In the Barnes Medical Center, the social service department has found an effective way to help patients adjust to a new way of life through "social group work." Richard Swaine, social worker in the department for the past two years, was named full-time group work co-ordinator this fall. With the help of other social workers in the department, he looks for patients "in the same boat" who might possibly benefit by getting together and discussing similar problems.

He has had enthusiastic response from patients, doctors and the social work staff and has formed many groups during the past two years. So far, the groups have been mainly parents of patients at Children's Hospital and adult patients attending rehabilitation sessions here.

Group work differs from the usual concept of social work. Most social workers are caseworkers who concentrate on helping individual patients. The group worker arranges meetings of individuals with common problems so that they can exchange ideas and experiences, in the hope of giving them

better insight into their problems. The group worker is usually the discussion leader. In a typical 10-session group, doctors are invited to at least one session to answer patients' questions.

Mr. Swaine tells of one group of paraplegic men (lower extremities paralyzed) who met weekly for three or four months. The topics they found most interesting to discuss at various sessions were hand-controlled cars, bowel and bladder control, sex, how to be a good father, and their worth as men. They ranged in age from 20 to 55, single and married, white and Negro. Their last meeting was a picnic at Pere Marquette State Park, where they had a wheelchair ballgame. They did the batting and their children ran the bases.

At Children's Hospital seventy parents from the outpatient clinics have been divided into six groups to discuss six common problems: Orthopedic, birth defects, diabetic, cardiac, leukemia and hemophilia in their children.

Mr. Swaine sees many opportunities in the medical center to form different

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Dr. Fryer in Rome for Plastic Surgeons Meet

Dr. Minot P. Fryer, associate surgeon at Barnes Hospital, will attend the International Conference of Plastic Surgeons Nov. 8-13 in Rome, Italy.

Dr. Fryer, who is president of the American Assn. of Plastic Surgeons, will be a moderator at some of the sessions during the week-long conference.

The international group meets every four years. Recent conferences have been held in Washington, D.C., London and Stockholm.

Dr. Walter Ballinger Speaks at Fall Meeting of Barnes & Allied Hospitals Society



Dr. S. Michael Freiman, Dr. Carl Lyss, Dr. Harold Scheff and Dr. Benjamin A. Borowsky.



Dr. Virgil Loeb presided at the meeting.



Dr. Leo Sachar, Dr. Harold Cutler and Dr. Cyril Costello.



Dr. Edward Kowert, Dr. Willard Walker, Dr. Richard Sisson and Dr. Bernard Garfinkel.



Dr. Jessie L. Ternberg, Dr. Mable F. Purkerson and Dr. Norman Muschany.



Dr. Samuel B. Guze and Dr. Walter F. Ballinger chat over dinner.

International Visitors Learn About Barnes Teaching Programs



TWO INTERNATIONAL GUESTS visited the Barnes Medical Center Sept. 25. In the photo at left, Dr. Cihat Abaoglu (right), dean of the University of Istanbul Medical School, tours the hospital's clinical chemistry laboratories with Dr. C. O. Vermillion, associate director, and Miss Wilma White, laboratory supervisor. He was particularly interested in learning about the integration of services between Barnes and Washington University School of Medicine. In the photo at right, Dr. Tadanobu Takagi (second on right), director of the surgical center at the University of Tokyo Hospital, enters a gallery which overlooks Barnes Operating Rooms. He was on a tour of the United States to study operating rooms in teaching centers. Other cities on his agenda were Boston and Dallas. Here he is accompanied by (left to right) Miss Nancy Craig, assistant director; Miss Jacqueline Treybal, operating room supervisor, and Ed Tinkham, his St. Louis guide.

Hartford Research Results:

Chromosomal Analysis 'Grows Up' at Barnes

A team of obstetricians at Barnes Hospital have been bringing about an unusual "birth" here for the past five years.

The "baby" is chromosomal analysis—a study of a patient's inherited chromosomal makeup to determine birth defects. Under terms of a grant from The John A. Hartford Foundation, Inc., to Barnes Hospital, three researchers—Dr. Ralph B. Woolf, Dr. Michael Freiman, and Dr. Alfred Sherman—have established a cytogenetics laboratory and set an analysis procedure as a routine test available to all who need it.

"When we started our work on chromosomal analysis in 1962, there were no laboratories where this service was available to patients," Dr. Freiman said. "This work was still in a research stage. Now chromosomal analysis has come of age. It is out of the realm of possibility and into the realm of feasibility."

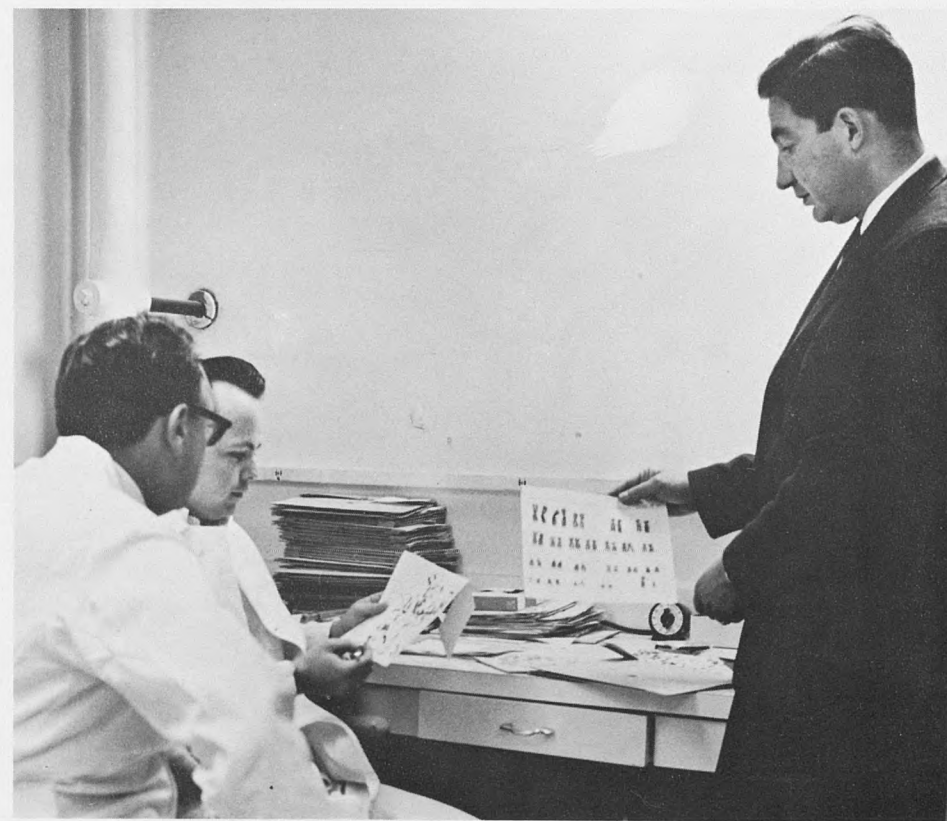
This was the purpose of the Hartford grants. The second grant expired Oct. 31, and the work of chromosomal analysis will now be done as part of the work of W.U. School of Medicine's division of medical genetics, directed by Dr. William S. Sly. The cytogenetics laboratory will be part of the genetics clinic program, headed by Dr. David L. Rimoim, who has both an M.D. degree and a Ph.D. in human genetics.

The two Hartford grants provided a total of \$236,000 for the first cytogenetics laboratory. The three directors of the program aimed at establishing a service center for all chromosomal analysis needed in the midwest. (Dr. Woolf and Dr. Freiman are associate obstetrician-gynecologists on the Barnes staff. Dr. Sherman is a former OB-GYN associate who has since accepted a position in another city.)

The laboratory at Barnes handled all requests for chromosomal analysis in this part of the U. S., as well as analyz-

ing a representative sample of all babies born at Maternity Hospital.

Until ten years ago, scientists knew very little about the chromosome, which determines each person's genetic legacy from his parents. In the late 1950's, researchers began to develop techniques to visualize the chromosome, and prove that many diseases result from abnormalities in chromosomal composition.



MATCHING PAIRS of chromosomes on charts is the job of James Johndrow (center), technician, who consults here with Dr. Ralph Woolf (left) and Dr. Michael Freiman, obstetrician-gynecologists. A photograph is taken of the human cell under the microscope. These are then enlarged as in the photo at left. The technician cuts out the individual chromosomes, matches them in pairs and pastes them on a chart. Twenty photographs are taken for each patient analyzed, so that comparisons can be made.

The Barnes team was a pioneering effort in exploring the secrets of the tiny chromosomes, which are part of every body cell. Findings from the laboratory here have contributed significantly to the scientists' knowledge of hereditary abnormalities. When these abnormalities

are determined very early in life, treatment can be more effective.

The method now used to analyze an individual's chromosomes begins with a blood sample. White blood cells are separated, and allowed to grow. When the cell is ready to divide, a chemical is added to stop growth. It is only at this stage that chromosomes can be seen. Then the cell is stained, put under

Apples Failed to Keep Family's Doctors Away



HE HASN'T GIVEN UP on apples yet, even though thousands of bushels of this Southern Illinois fruit failed to keep the doctor away from the Nash family this fall.

Apples didn't keep the doctor away from the Nash family this fall — not even during the apple festival celebration which Marion Nash co-ordinates every year in Murphysboro, Ill.

There were doctors for every member of his family except his son who somehow escaped hospitalization. "The last time I looked he was doing fine," said Mr. Nash thankfully from his bed in Barnes Hospital. He was in Barnes for a hip ailment.

Meanwhile the three female members of his family were hospitalized too—Mrs. Nash for a nervous condition here at Barnes; 11-year-old Theresa for plastic surgery and an arm injury in Children's Hospital, and Kathy, 19, in a Southern Illinois hospital. The two girls were hurt in a recent auto accident.

Mr. Nash had his hands full — but not with apples.

Group Work

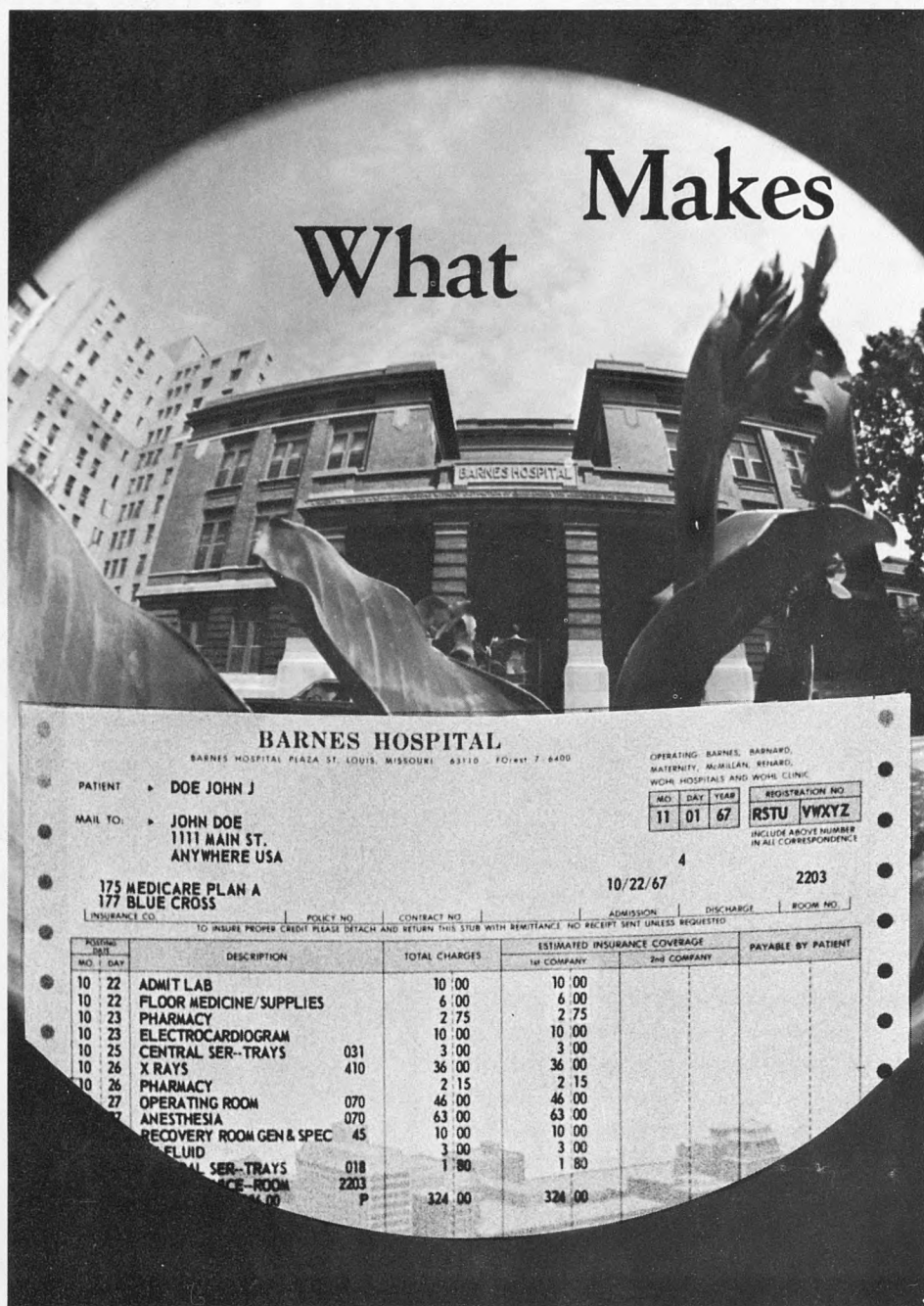
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groups with similar concerns. He says group work is especially beneficial to outpatients who are back in the community, facing new problems every day.

He will be approaching other departments in the medical center to suggest possible groups and to ask for suggestions to form new ones.

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Hospital Costs Climb?



Barnes patients receive itemized bills for services.

Every hospital employee hears the refrain today—"Wow! My hospital bill was high. I had no idea it would be so much."

Like everything else, hospital costs have gone up. But there is a difference. The family WANTS the new car, the new furniture, the two-week vacation. They know in advance, they have fun spending the money, they accept the rising costs philosophically.

But no one WANTS to be sick. And illness usually strikes unexpectedly. And no one knows what it will cost in advance.

And, hospitalization costs have gone up. A greater increase than for other necessities. There are reasons, of course. Anything that involves personal services that can't be automated (and no one has yet found a way to automate dedicated service to sick people), and a continuous improvement in technology, will be especially sensitive to rising prices.

Not too many years ago, as many older persons remember, hospitals were primarily a place where people came to die. Today, they come to live—and more comfortably than they did before their visit. The hope that is held out to the patient is made possible by all the advances made in medical science. But the treatment, which wasn't available in 1930 and which may save your life today, costs money.

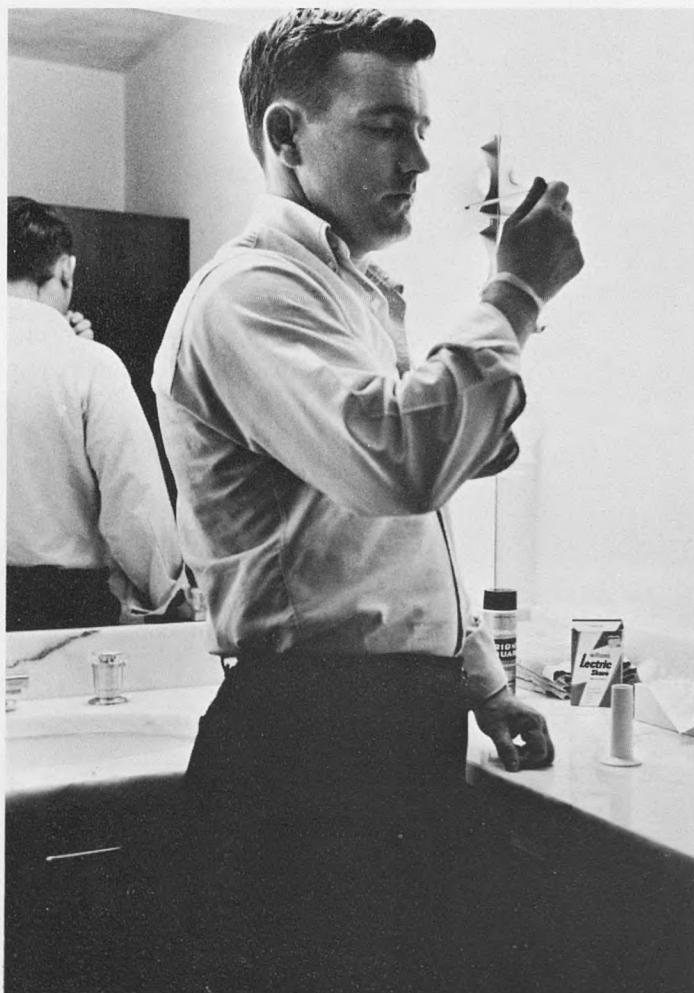
The time of highly skilled personnel, the costs of complicated equipment, the ingredients in the "wonder drug"—all so vital to the person who is ill—cost the hospital money, an expenditure which must be passed on to the patient.

There are other reasons for the climb in costs. About 65 per cent of any hospital bill goes for payroll. Compare that with industry, where payroll costs average about one third of total operating expenditures. Hospital wages and salaries climbed 451 per cent over a period from 1946 to 1965. They have continued this sharp rise in the past two years. By comparison, nonwage costs in the same period increased "only" 286 per cent.

While the increased wages of the average employee have increased dramatically, not all of the staggering increase showed up on each individual's paycheck. More employees are needed, due to shorter working hours, improved sick leave and vacation policies, and most of all, because of the far more complex care given the patient today.

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Although the cost escalation can't be halted,



Self-care facilities keep patient's bill down.

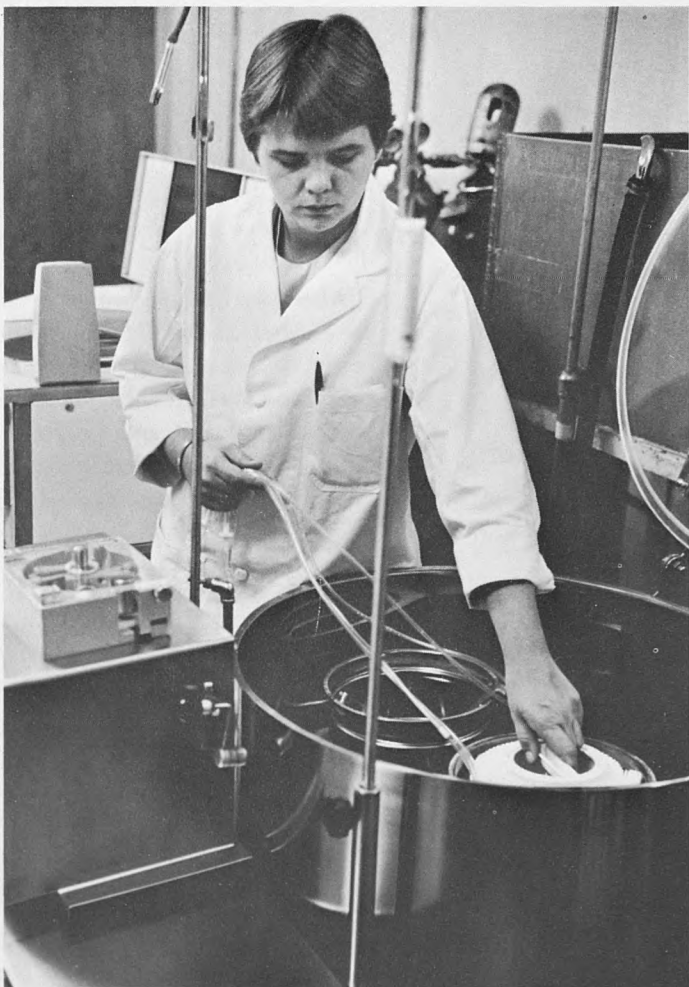


Automated laboratory tests are less expensive.



All of these persons make up the hospital team which serves every Barnes patient.

these are some ways Barnes is slowing the pace



New artificial kidney coil has cut treatment costs.

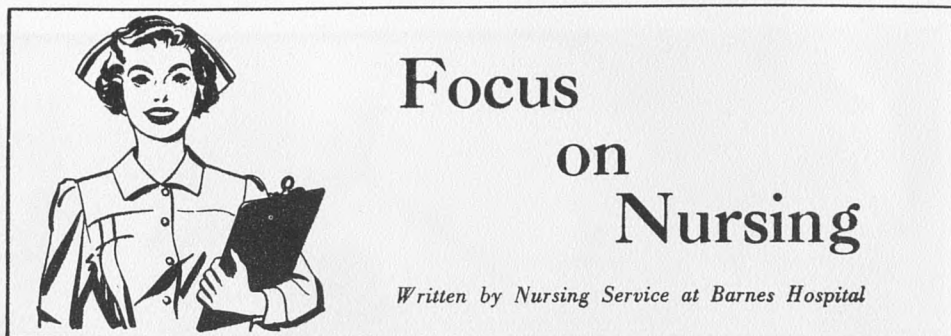


Computer insures charges will be in line with costs.

Mother of 6 Took Barnes Refresher Course



MOTHER OF FIVE daughters and a son too, Mrs. Ruth Stansbrough, R. N., decided to return to nursing last year. She attended the first refresher course offered by Barnes Hospital and now works three days a week in Ward 1418. An active Girl Scout leader in recent years, she still finds time to participate in some Scout activities with her daughters. Left to right, Elizabeth 17, Mrs. Stansbrough, and Deborah, 15. Seated: Twins Patricia and Phyllis, 14, and Christine, 12.



Employees, Volunteers Attend Annual Meeting Of Missouri Hospital Ass'n in Jefferson City

Seven from the staff of Barnes Hospital attended the 45th annual meeting of the Missouri Hospital Assn. Oct. 18-20 in Jefferson City. They were: Dr. C. O. Vermillion, associate director; Robert McAuliffe, controller; Robert Nelson, assistant director; Miss Joyce Brueggeman, R.N., and Miss Leva McCollum, R.N., nursing patient care consultants; Mrs. Dorothy Kelly, director of volunteers, and Mrs. Betty Bressem, night volunteer director.

Seven members of the Women's Auxiliary attended: Mrs. Kenneth Gable, Mrs. Raymond Meisenheimer, Mrs. Spencer Allen, Mrs. Bertram Tremayne, Mrs. Harvey Owen, Mrs. Arthur Clark and Mrs. Earl T. Klein.

Presiding at a session Oct. 19 for hospital accountants was Robert Mc-

Auliffe. James O. Hepner, director of the hospital administration program at Washington University School of Medicine, was a panelist at an administrators' session. The women's auxiliaries from Barnes, Jewish and Children's Hospitals presented a skit, "Health Careers That Count." They gave the same skit a year ago in St. Louis to interest women in the community in entering hospital work.

Current members of various committees in the state association from Barnes Hospital are: Accounting and Office Management, Dr. C. O. Vermillion and Robert McAuliffe; Allied Organizations Liaison, Robert E. Frank; Legislative and Government Relations, Donald Horsh, and Sub-Committee on St. Louis Blue Cross Relations, Dr. Vermillion.

15 Registered Nurses Enrolled in Fourth Refresher Course

Enrolled in the fourth refresher course offered at Barnes Hospital are 15 registered nurses who plan to re-enter nursing after completing the free six-week course. Teaching expenses are covered by the Missouri Hospital Assn. through a grant from the U. S. Department of Health, Education and Welfare.

They are: Mrs. Vivian Shaw, Mrs. Agnes Phegley, Mrs. Mary Wollbrinck, Mrs. Helen Musgrave, Mrs. Emma Jones, Mrs. Florence Canada, Mrs. Helen Mowry, Mrs. Bertha Gomez, Mrs. Veronica Rogers, Mrs. Annette LePique, Mrs. Martha Martz, Mrs. Dorothy McDarby, Mrs. Joan Weir, Mrs. Mary Strauss and Mrs. Virginia Cunningham.

The women meet six weeks for classroom instruction as well as clinical experience with patients on the nursing floors. A graduation tea will be held Thursday, Nov. 16, in the nurses' residence.

Women who have completed earlier courses are now working at Barnes and at other hospitals in the community—some part-time and some on a full-time basis. The refresher course is one way Barnes has found to encourage nurses to return to the profession, thus helping relieve the nationwide shortage.

O. R. Nurse Is Married, Moves to San Francisco

Miss Wilma J. Patton, has resigned as staff nurse in the Barnes Operating Room to marry Dr. Creighton Wong on Oct. 21. They will live in San Francisco.



NURSES ATTENDING the fourth refresher course which began Oct. 9 were featured on a KTVI-TV newscast. Here the cameraman shoots some film of Mrs. Marion Langer as she diagrams the team concept of nursing on the blackboard.

Staff Nurses Attend Ohio State Convention

Four from Nursing Service attended the three-day meeting of the Ohio State Nurses Assn. Oct. 3-5 at Columbus, Ohio. The trip was made to recruit registered and student nurses from the state of Ohio.

More than 1300 nurses attended the meeting. Representing Barnes Hospital were Miss Ann Vose, director of nursing; Miss Susan Hackman, assistant director; Mrs. Marilyn Anderson, head nurse on 11200, and Miss Angela Leal, staff nurse on 10100.

Barbara Grellner, staff nurse in McMillan O.R. and Jacquelyn Treybal,

supervisor in Barnes O.R., attended a seminar for Operating Room Personnel in Erie, Pa., Sept. 11-15 at the American Sterilizer Co.

83 Student Nurses From Barnes School Receive Their Caps

Eighty-three freshmen in the Barnes Hospital School of Nursing received the caps of their profession Oct. 13 in the Washington University School of Medicine Auditorium. Their families and friends attended the special ceremonies.

Each student was presented for capping by Miss Helen McMurtry, associate director of nursing education, and Mrs. Valarie Weygandt, co-ordinator of the freshman nursing program. Welcomes were given by Miss Ann Vose, director of nursing, and Thomas Winston, administrative assistant. Chaplain George Bowles gave the invocation and benediction.

Also participating in the program were Mrs. Robin Moushey, president of the School of Nursing's Student Association. Musical selections, under the direction of Kenneth Schuller, were provided by the students' choral group.

During the ceremony the students took the pledge of Florence Nightingale, the originator of modern nursing.

The Nightingale Pledge

"I solemnly pledge myself before God and in the presence of this assembly to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug. I will do all in my power to elevate the standard of my profession, and I will hold in confidence all personal matters committed to my keeping, and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician in his work and devote myself to the welfare of those committed to my care."

Hospital Gardener Plants 'A Little of Everything' To Keep Barnes Green

Hospital beautification. It's a task that takes a lot of imagination and perseverance, especially when the green grass keeps disappearing, as parking lots and new buildings take over the wide open spaces at Barnes Hospital.

For 15 years Dixie Trovillion has been the chief groundskeeper and gardener at the medical center. He is responsible for the outdoor maintenance of all areas between Euclid Avenue, Barnes Hospital Plaza, Kings-highway Boulevard and Audubon Avenue. The deeply tanned gentleman says he has rarely spent more than 30 minutes at a time indoors here.



CLIPPING a bed of cannas on the Wohl Hospital bridge is Dixie Trovillion, chief groundskeeper. For fall, the cannas were replaced with mums of many colors.

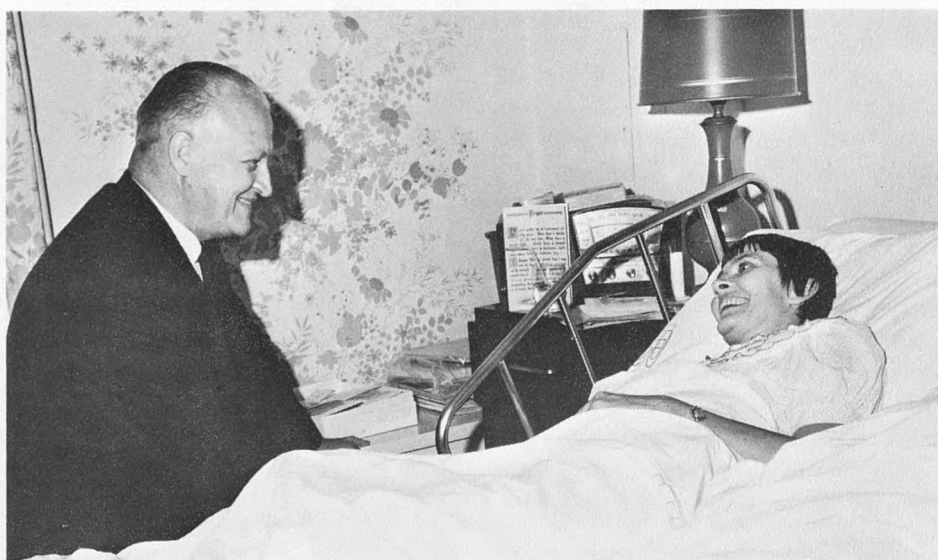
Dixie inherited some of his love for flowers from his father during the years they lived in Southeast Missouri. When his father retired, he moved to California where he now raises roses. Before Dixie came to Barnes he worked as a welder.

"Over the years I've planted just about everything that could possibly grow at Barnes," Dixie says. As a result he knows which shrubs and flowers thrive best in every area. He has filled in many corners and rocky slopes with tobacco stalks, pumpkin vines and even gourds.

But to Barnes employees, staff doctors and patients, he is best known for his mums in the fall, his tulips in the spring and his cannas in the summer. Dixie and the two men who assist him hear many compliments every year as the seasons change and the new plantings appear.

"I never throw a flower away," Dixie says. "Somebody can always use a flower." And many of his discarded plantings and blossoms have been taken inside to add a note of brightness to a patient's room.

Lutheran Chaplain Takes New Duties Here



NEW LUTHERAN CHAPLAIN Ernest Koch stops by to visit Mrs. Evangeline Glass of St. Louis, a recent patient at Barnes Hospital.

What Makes Hospital Costs Climb?

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The patient might ask, "Well, why did wages for hospital employees increase so greatly?"

There are many reasons. Hospitals had some "catching up" to do. Traditionally, their wages were lower than for comparable work in industry. The hospital was able to do this because jobs were scarce; some employees felt the charitable nature of the work compensated for lower pay; and most important of all, hospital personnel was, and remains, primarily female. According to the 1964 figures from the U. S. Department of Labor, 81 per cent of all hospital employees are women. Before the second World War, there was little opportunity for the female worker, and little competition for her services. Today, one third of the labor force is female, and there is a larger variety of jobs available to the woman.

It's an unpleasant fact that even if the ratio of hospital wage rates to the wage rates of general industry remained at the present level, hospital costs would continue to rise more rapidly than the general cost of living. This is because the hospital's commodity is service. And thus, a much greater than average proportion of its expenditure

is for wages.

Though there are few ways for hospitals to increase productivity per man hour in the way that industry has done, Barnes has been able to utilize technology to cut costs in some areas. Possibly the most significant place is in the laboratories, where automated tests have resulted in faster, less expensive analysis of the patient's body fluids.

Self care, our unit in Queeny Tower where patients receive only a minimum level of care, helps the person who is able to handle some of his own needs. He pays a 30 per cent lower bill—because he does not require the close supervision of highly skilled personnel. Improved equipment which cuts time from a complicated procedure—such as the new coil being used in kidney dialysis—will result in a lessened cost to the patient.

These are the bright spots. And there is another one, brightest of all, that is not measured in dollars and cents. It is the life of a young mother, sustained because of an artificial kidney, or the ability of an eight-year-old boy who was hideously burned in an accident to return to sandlot football skirmishes. The bill for care of these two would

Messenger of Month Receives Promotion



ACCEPTING A CERTIFICATE of Merit naming her "Messenger of the Month" is Jeanne Stiles from Dillon Trulove, executive housekeeper. Here she sits at her new desk in the maintenance department.

Miss Jeanne Stiles, employee at Barnes Hospital since November, 1966, has been named escort messenger of the month for her work in the department of dispatch. Miss Stiles is now typist and receptionist in the maintenance department. She was promoted to this new job at the end of September.

Miss Stiles, who attended Southwest High School, is the oldest in her family, with three brothers and one sister. She now attends the American Business College and is completing work on her high school diploma.

Sports which she enjoys most are ice skating and swimming.

Miss Stiles was rated on the basis of punctuality, reliability, appearance, patient interest, courtesy, attitude, improvement, and productivity by a panel of four.

Dr. Arthur Eisen Named Chief of Dermatology In Barnes Medical Center

Arthur Z. Eisen, M.D., has been named new chief of dermatology at Barnes Hospital and W. U. School of Medicine. Dr. Eisen, who was assistant professor of dermatology at Harvard Medical School and on the staff of Massachusetts General Hospital, came to the medical center the first week in October.



Dr. Eisen

He received his M.D. degree from the University of Pennsylvania School of Medicine in 1957. From 1957-59, he was an intern and assistant resident in medicine at the U. of Rochester Medical Center and Strong Memorial Hospital. He was a clinical associate with the National Cancer Institute in 1959-61.

In 1962, he became a research fellow in dermatology at Harvard Medical School and Massachusetts General Hospital, where he has worked for the past five years.

Dr. Eisen plans to continue research into the study of human skin collagenases. He has been able to isolate the enzyme, collagenase, from normal human skin and has related increased levels of this enzyme to the pathogenesis of certain skin disease.

John J. Jeffry, Ph.D., also from Harvard, joined the dermatology division last month. He will continue his investigations in the area of connective tissues metabolism with Dr. Eisen.

Dr. Eisen replaces Dr. Herbert Gass who was acting chief of the division until Oct. 1. Dr. Gass left to work at the U. S. Public Health Service Hospital at Carville, La.

Hospital Costs (Continued)

have been small 20 years ago. It would have covered making them as comfortable as possible during the hours before death. Today, their bills are considerable. But their families won't put a pricetag on their lives.

84 Physicians Take Internal Med Exams

Eighty-four doctors from across the country took oral examinations Oct. 10 and 11 at four St. Louis hospitals—Barnes, City, Jewish and Veteran's. Each candidate seeks a specialty rating in internal medicine.

At Barnes, Wards 1418 and 2418 participated in the two-day examinations. Each doctor examined two patients, and then was questioned on his findings. All candidates had already successfully completed the written portion of the exam before coming to St. Louis.

Administering the exam to the doctors were 28 specialists in internal medicine from leading medical centers across the country.

Lucile Healy Retires; Taught 1,300 Students During 14 Years Here

Miss Lucile Healy, assistant professor of psychiatric social work at the Washington University School of Medicine, retired on Oct. 1. Miss Healy who has returned to her hometown, St. Paul, Minn., was associated with both the departments of psychiatry and social work since 1953.

During those 14 years, Miss Healy taught more than 1,300 senior medical students while they studied psychiatry, working with patients in the Wohl Clinics. Her administrative duties included working with agencies in the St. Louis area who referred patients to the clinic for care and treatment. She also worked on a less formal basis with psychiatric residents in the clinic.

Before George Dixon, director of Barnes social service department, came on staff in April, Miss Healy and two other persons were on an administrative committee which directed the department. She was an assistant professor at St. Louis University's School of Social Service for four years before coming here.

A farewell reception was given in her honor Sept. 22 in the penthouse of Olin Residence Hall.

Chromosomes

(Continued from Page 3)

have never been seen. (There are thousands in each chromosome and they are too small to visualize.)

The photograph of the chromosomes is cut apart by a specially trained technician. They are paired on a chart. Then this chart is analyzed by a physician to detect possible abnormalities.

The Barnes cytogenetics laboratory has learned a great deal about the chromosome in the years of its study under the two Hartford grants. First, they have found that there can be chromosomal variations, even in a normal person. They have learned a great deal about hereditary diseases, such as mongolism, which is caused by chromosomal defects.

The researchers at Barnes filed each chromosomal analysis according to defect, and cross-filed the same information according to clinical disorder. This is an unusual approach, and has resulted in much greater understanding. In other studies, only the obviously abnormal were studied. The research at Barnes included the adults and babies believed to be normal. Chromosomal deviations were found in normal persons, and this leads to a possibility that when a chromosomal defect is found in a person obviously suffering from a disorder, it is not always the chromosomes which originate the trouble.

Parents of children born with a birth defect must, first of all, have the best medical care and advice available to care for their child. Then, they need counseling on the chances of producing

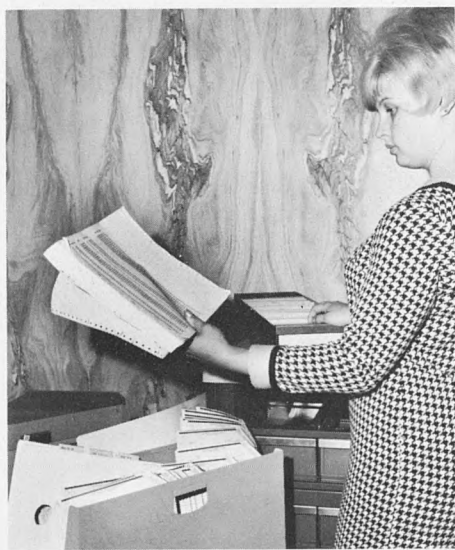
Clinic Admitting Appointments Computerized (Continued from Page 1)

until now. All paperwork and scheduling have been done manually for years. Now all clinic scheduling and appointments will become simplified with the aid of Barnes 360 IBM computer.

It was not unusual for a patient to wait half the day, or in some cases, even all day before he could be examined by doctors in the clinics—especially if he had several ailments and needed to visit more than one clinic. This imposed a real burden on patients who had to take off work, who were without babysitters, or who came from as far as 100 miles for appointments.

Under the new system, the doctor as well as the patient will benefit. In the past, the resident or intern in the examination room did not know whom he would see until the actual day of the patient's visit. Now he will know 48 hours in advance exactly which patients he will see at certain specified times during a given day. The computer makes this possible by providing a printout sheet which lists all of a doctor's appointments. The sheet will also indicate open times for unscheduled appointments, so that doctors can handle emergency visits should they arise.

Hospital personnel who work in the clinics are already optimistic about the benefits they will accrue after the new system is in full operation. The Eye Clinic appointments were the first to be computerized. On Nov. 1 patients began keeping appointments under the new system. After the first of the year, the other clinics will operate under similar



FILING patients' appointments and records will be much easier when the compact IBM punch cards (shown at right) replace the bulky "tub" filing system (at left) formerly used.

Chromosomes

(Continued)

another child with the same defect. Often, if the child is a mongoloid, the "odds" of having another baby with the same defect can be predicted. The Chromosomal analysis will help the doctor in his approach to both problems.

"We feel that our objectives have been accomplished," said Dr. Woolf. "Today chromosomal analysis is available as a regular service in our medical center, and it has been proven to be a procedure which is possible on a routine basis, in any up to date medical institution."



PATIENTS in the Eye Clinic wait in line to receive new appointments at the counter. This large area of filing tubs and phones will be replaced by one compact desk and cabinet.

systems. It took Eye Clinic personnel more than a month to "translate" their bulky old records onto the slim IBM cards to be used in the computer.

Personnel in the clinics will save more time because of less paperwork, phoning, checking and re-checking records. Those benefiting are the nurses, clerks scheduling future appointments, clerks working on the appointments of the day, receptionists and cashiers. Printout sheets provided by the computer before they begin their day's work, will let them know in advance exactly how much work to expect on a given day. In this way they can organize their workday much more efficiently and eliminate much of the confusion which comes from paging through stacks of paper.

Personnel in the medical records department anticipate a much smoother handling of patients' records. Under the old system, a clinic would send a tiny slip of paper to the department requesting a patient's record about two days before a patient was expected to appear in the clinic. There was no sequence or order as to which records should be sent first. Often a patient had to be examined in two clinics on the same day. The whereabouts of his

record was often unclear at a given moment. The printout sheet provided for medical records personnel will let them know too, just which records are needed at a given time on a given day. Each patient will be cross-filed, both alphabetically and according to clinic registration number.

Primarily responsible for working out this new system is Joseph Greco, associate director, with the help of clinic personnel and Everett Menendez, data processing manager.

It is anticipated that after all clinic appointments are computerized, the results will be improved patient service, clearer paperwork for doctors and employees, and more accurate statistics and records. Further refinements are contemplated as the system goes into effect, Mr. Greco said.

Barnes administrators say that this is just one of many ways the hospital's computer can be used to make a department run more efficiently, timewise as well as costwise. The phrase, "there must be an easier way," can become a reality for other hospital departments who learn how to apply the "brains" and organizational ability of Barnes computer to their workloads.

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